

TRANSMITTAL FORM

Attorney Docket No.
GB919990081US1/1751PIn re the application: **John B. IBBOTSON et al.**Confirmation No.: **8913**Serial No: **09/675,468**Group Art Unit: **2173**Filed: **September 28, 2000**Examiner: **Pillai, Namitha**For: **Method and Tool for Graphically Defining an Expression**#14
5-10-04
B.J.H

ENCLOSURES (check all that apply)

<input type="checkbox"/>	Amendment/Reply	<input type="checkbox"/>	Assignment and Recordation Cover Sheet	<input type="checkbox"/>	After Allowance Communication to Group
<input type="checkbox"/>	After Final	<input type="checkbox"/>	Part B-Issue Fee Transmittal	<input type="checkbox"/>	Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/>	Information disclosure statement	<input type="checkbox"/>	Letter to Draftsman	<input checked="" type="checkbox"/>	Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/>	Form 1449	<input type="checkbox"/>	Drawings	<input type="checkbox"/>	Status Letter
<input type="checkbox"/>	(X) Copies of References	<input type="checkbox"/>	Petition	<input checked="" type="checkbox"/>	Postcard
<input checked="" type="checkbox"/>	Extension of Time Request *	<input type="checkbox"/>	Fee Address Indication Form	<input type="checkbox"/>	Other Enclosure(s) (please identify below):
<input type="checkbox"/>	Express Abandonment	<input type="checkbox"/>	Terminal Disclaimer	RECEIVED MAY 07 2004 Technology Center 2100	
<input type="checkbox"/>	Certified Copy of Priority Doc	<input type="checkbox"/>	Power of Attorney and Revocation of Prior Powers		
<input type="checkbox"/>	Response to Incomplete Appln	<input type="checkbox"/>	Change of Correspondence Address		
<input type="checkbox"/>	Response to Missing Parts	*Extension of Term: Pursuant to 37 CFR 1.136, Applicant petitions the Commissioner to extend the time for response for one month(s), from March 31, 2004 to April 30, 2004.			
<input type="checkbox"/>	Executed Declaration by Inventor(s)				

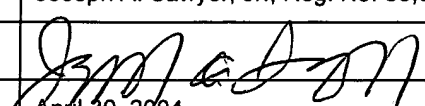
CLAIMS

FOR	Claims Remaining After Amendment	Highest # of Claims Previously Paid For	Extra Claims	RATE	FEE
Total Claims	19	20	0	\$18.00	\$ 0.00
Independent Claims	4	4	0	\$86.00	\$ 0.00
One-Month Extension Fee					\$110.00
Notice of Appeal Fee					\$330.00
Total Fees					\$440.00

METHOD OF PAYMENT

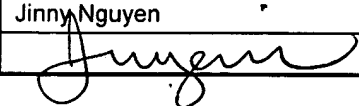
<input type="checkbox"/>	Check no. _____ in the amount of \$ _____ is enclosed for payment of fees.
<input checked="" type="checkbox"/>	Charge \$440.00 to Deposit Account No. 09-0460 (IBM Corporation) for payment of fees.
<input checked="" type="checkbox"/>	Charge any additional fees or credit any overpayment to Deposit Account No. 09-0460 (IBM Corporation).

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Attorney Name	Joseph A. Sawyer, Jr., Reg. No. 30,801
Signature	
Date	April 30, 2004

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date: **April 30, 2004**

Type or printed name	Jinny Nguyen
Signature	

05/05/2004 WGBREH1 00000058 090460 110.00 DA 02 FC:1251